

COUNTY MEDICAL SERVICES PROGRAM  
1800 THIRD STREET, ROOM 100  
P.O. BOX 942732  
SACRAMENTO, CA 94234-7320  
(916) 322-1478



CMSP Letter No. : 03-01  
Issue Date : February 14, 2003

TO: ALL COUNTY MEDICAL SERVICES PROGRAM  
WELFARE DIRECTORS

SUBJECT: VERIFICATION OF FISCAL YEAR (FY) 2001-02  
ELIGIBILITY EXPENDITURES

The purpose of this letter is to request verification of County Administrative Costs associated with the County Medical Services Program (CMSP) eligibility process. Enclosed is a spreadsheet listing CMSP eligibility expenditures, as reported, for FY 2001-02.

We are requesting your review of the expenditures as reported on the attached spreadsheet. If you find that the information for your county is correct, there is no need to take any further action. If additional or corrected information is identified, please send the completed report to Ms. Sherrie Ivec at the address listed in this letterhead.

**Corrections must be received no later than Wednesday, April 2, 2003.**

The reports may also be faxed to (916) 323-3350. If you have any questions regarding this report, please contact Ms. Ivec at (916) 322-1483.

William L. Alameda, Chief  
County Medical Services Program Unit

Enclosures

cc: Ms. Sherrie Ivec  
County Medical Services Program  
Department of Health Services  
1800 Third Street, Room 100  
P.O. Box 942732  
Sacramento, CA 94234-7320

**CMSP ELIGIBILITY EXPENDITURES**  
**FISCAL YEAR 2001-2002**

COUNTY	1ST QTR 9/30/2001	2ND QTR 12/31/2001	3RD QTR 3/31/2002	4TH QTR 6/30/2002	TOTAL	ALLOCATION	AMOUNT REMAINING IN ALLOCATION (+/-)
Alpine	\$3,224	\$4,176	\$3,961	\$3,489	\$14,850	\$16,001	\$1,151
Amador	\$33,922	\$31,763	\$31,118	\$27,692	\$124,495	\$135,081	\$10,586
Butte	\$239,887	\$189,520	\$252,199	\$215,914	\$897,520	\$948,436	\$50,916
Calaveras	\$47,950	\$46,044	\$45,373	\$73,285	\$212,652	\$139,210	(\$73,442)
Colusa	\$24,742	\$21,824	\$23,666	\$22,689	\$92,921	\$104,053	\$11,132
Del Norte	\$51,066	\$36,478	\$30,464	\$30,277	\$148,285	\$147,456	(\$829)
El Dorado	\$191,505	\$233,425	\$213,559	\$192,128	\$830,617	\$760,599	(\$70,018)
Glenn	\$45,812	\$49,600	\$38,755	\$80,350	\$214,517	\$204,782	(\$9,735)
Humboldt	\$299,266	\$281,233	\$274,447	\$317,030	\$1,171,976	\$975,890	(\$196,086)
Imperial	\$279,618	\$263,076	\$192,089	\$224,179	\$958,962	\$960,331	\$1,369
Inyo	\$30,451	\$39,956	\$26,126	\$43,318	\$139,851	\$154,547	\$14,696
Kings	\$62,005	\$99,803	\$84,042	\$108,437	\$354,287	\$381,238	\$26,951
Lake	\$72,239	\$78,196	\$74,024	\$65,347	\$289,806	\$283,661	(\$6,145)
Lassen	\$20,153	\$24,124	\$27,225	\$28,258	\$99,760	\$120,093	\$20,333
Madera	\$158,086	\$182,044	\$154,980	\$73,781	\$568,891	\$541,592	(\$27,299)
Maricopa	\$254,216	\$300,379	\$342,684	\$377,538	\$1,274,817	\$959,527	(\$315,290)
Mariposa	\$35,320	\$19,537	\$28,563	\$37,661	\$121,081	\$115,923	(\$5,158)
Mendocino	\$138,683	\$227,377	\$105,130	\$314,217	\$785,407	\$1,054,453	\$269,046
Modoc	\$0	\$0	\$11,196	\$30,115	\$41,311	\$10,337	(\$30,974)
Mono	\$28,130	\$29,088	\$31,988	\$22,780	\$111,986	\$149,133	\$37,147
Napa	\$107,024	\$121,701	\$131,862	\$152,169	\$512,756	\$598,275	\$85,519
Nevada	\$89,471	\$97,811	\$91,064	\$217,238	\$495,584	\$319,810	(\$175,774)
Plumas	\$15,133	\$24,066	\$32,022	\$25,981	\$97,202	\$64,838	(\$32,364)
San Benito	\$33,298	\$33,620	\$35,912	\$35,635	\$138,465	\$147,783	\$9,318
Shasta	\$236,512	\$287,587	\$283,189	\$321,501	\$1,128,789	\$1,110,367	(\$18,422)
Sierra	\$1,863	\$3,946	\$1,633	\$3,158	\$10,600	\$9,593	(\$1,007)
Siskiyou	\$93,116	\$36,772	\$50,848	\$70,652	\$251,388	\$288,365	\$36,977
Solano	\$463,331	\$485,504	\$523,488	\$544,259	\$2,016,582	\$1,916,832	(\$99,750)
Sonoma	\$544,373	\$567,274	\$473,392	\$349,978	\$1,935,017	\$1,938,370	\$3,353
Sutter	\$82,491	\$67,941	\$71,450	\$97,009	\$318,891	\$332,801	\$13,910
Tehama	\$73,849	\$75,528	\$76,983	\$84,975	\$311,335	\$311,819	\$484
Trinity	\$11,282	\$11,723	\$15,878	\$17,058	\$55,941	\$53,194	(\$2,747)
Tuolumne	\$105,227	\$112,091	\$123,724	\$32,045	\$373,087	\$367,162	(\$5,925)
Yuba	\$128,618	\$67,104	\$176,893	\$141,365	\$513,980	\$513,518	(\$462)
<b>TOTAL</b>	<b>\$4,001,863</b>	<b>\$4,150,311</b>	<b>\$4,079,927</b>	<b>\$4,381,508</b>	<b>\$16,613,609</b>	<b>\$16,135,070</b>	<b>(\$478,539)</b>

COUNTY MEDICAL SERVICES PROGRAM  
AMENDED ELIGIBILITY EXPENDITURE REPORT  
FOR THE STATE FISCAL YEAR 2001-02

QUARTER \_\_\_\_\_

AMOUNT FROM DHS WORKSHEET \$ \_\_\_\_\_

CORRECTED AMOUNT \$ \_\_\_\_\_

SUPPLEMENTAL CLAIM DATE: \_\_\_\_\_

SUPPLEMENTAL CLAIM AMOUNT \$ \_\_\_\_\_

REVISED TOTAL FOR THIS QUARTER \$ \_\_\_\_\_

---

QUARTER: \_\_\_\_\_

AMOUNT FROM DHS WORKSHEET \$ \_\_\_\_\_

CORRECTED AMOUNT \$ \_\_\_\_\_

SUPPLEMENTAL CLAIM DATE: \_\_\_\_\_

SUPPLEMENTAL CLAIM AMOUNT \$ \_\_\_\_\_

REVISED TOTAL FOR THIS QUARTER \$ \_\_\_\_\_

---

I certify, under penalty of perjury, that the amounts shown above are correct and accurately reflect the information which has been submitted to the State Department of Social Service on regular and supplemental (adjusted) Administrative Cost Claims.

\_\_\_\_\_  
(Printed Name/Title)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)